PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10625165

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE		OR			
			1					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			Z minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 =					X42=		OR	X84=		
М	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+140=	ļ ———	OR	+280=		
* 11	the difference	in column 1 is	less than z	ero, enter	"0" in c	column 2		TOTAL		OR	TOTAL	700	
CLAIMS AS AMENDED - PART II							TOTAL	L	IOU	Į.	750		
+		(Column 1)	(Column 2) (Column 3				SMALL ENTITY			OTHER THAN OR SMALL ENTITY			
AMENDMENTA	*	REMAINING AFTER AMENDMENT		NUME PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 2	Minus	** 0	20			X\$ 9=		OR	X\$18=	- 1 -	
	Ind pendent	* 2 ENTATION OF MI	Minus		3			X42=		OR	X84=		
4		TO TO TO THE		LINDENT	CLAIM		, [+140=		OR	+280=		
							L	TOTAL ADDIT, FEE	-	OR	TOTAL		
			NDDII. FEE			ADDIT. FEE							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	155	
	Independent	*	Minus	***		=	1 h	X42≈			X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	704=		
							L	+140=		OR	+280=		
							A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	<u> </u>	
	Independent	*	Minus	***		=	 -	X42=		ł			
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┞	A42=		OR	X84=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL ODIT, FEE		
•	he "Highest Num	ber Previously Paid	i For" (Total or	o SPACE IS Independer	nt) is the	highest numbe		ODIT. FEE L d in the appr	opriate box				